PERSONNEL REGISTER For use of this form, see AR 600-8-6; the proponent agency is DCS, G-1. ORGANIZATION DATE **ACTION REASON** DATE AND LEAVE GRADE REMARKS NAME (Print) (First Line) TIME OUT PCS ΤDY SIGNATURE (Second Line) $\underline{\mathsf{z}}$ 1 2 3 4 5 6 7 8 9 10

	ACT	ION	REASON						'
DATE AND TIME	Z	ОПТ	LEAVE	TDY	PCS	OTHER	NAME (Print) (First Line) SIGNATURE (Second Line)	GRADE	REMARKS
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